

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/556012

FILING DATE

04 DEC 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		/			
4	/		/			
5	/		/			
6	/		/			
7	/		/			
8	/		/			
9	/		/			
10	/		/			
11	/		/			
12	/		/			
13	/		/			
14	/		/			
15	/		/			
16	/		/			
17	/		/			
18	/		/			
19	/		/			
20	/		/			
21	/		/			
22	/		/			
23	/		/			
24	/		/			
25	/		/			
26	/		/			
27	/		/			
28	/		/			
29	/		/			
30	/		/			
31	/		/			
32	/		/			
33	/		/			
34	/		/			
35	/		/			
36	/		/			
37	/		/			
38	/		/			
39	/		/			
40	/		/			
41	/		/			
42	/		/			
43	/		/			
44	/		/			
45	/		/			
46	/		/			
47	/		/			
48	/		/			
49	/		/			
50	/		/			
TOTAL IND.	2		2			
TOTAL DEP.	65	←	64	←		
TOTAL CLAIMS	67		66			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		0		1		
52		0		1		
53		0		1		
54		0		1		
55		0		1		
56		0		1		
57		0		1		
58		0		1		
59		0		1		
60		0		1		
61		0		1		
62		0		1		
63		0		1		
64		0		1		
65		0		1		
66		0		1		
67		0		1		
68		0		1		
69		0		1		
70		0		1		
71		0		1		
72		0		1		
73		0		1		
74		0		1		
75		0		1		
76		0		1		
77		0		1		
78		0		1		
79		0		1		
80		0		1		
81		0		1		
82		0		1		
83		0		1		
84		0		1		
85		0		1		
86		0		1		
87		0		1		
88		0		1		
89		0		1		
90		0		1		
91		0		1		
92		0		1		
93		0		1		
94		0		1		
95		0		1		
96		0		1		
97		0		1		
98		0		1		
99		0		1		
100		0		1		
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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